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UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No. X-1383 US	
	First Inventor Austin H. Lesea	
	Title Control of Simultaneous Switch Noise From Multiple Outputs	
	Express Mail Label No. EV 000334406 US	

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Commissioner for Patents P.O. Box 1450; Mail Stop Patent Application Alexandria, Virginia 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)		6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Specification [Total Pages 17] (preferred arrangement set forth below) - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequent listing, a table, or a computer program listing appendix - Background of the invention - Brief Summary of the invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure		7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy (CRC) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 05]		ACCOMPANYING APPLICATION PARTS 8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input checked="" type="checkbox"/> Nonpublication Request under 35 U.S.C 122 (b)(2)(B). Applicant must attach form PTO/SB/35 or its equivalent. 16. <input type="checkbox"/> Other:	
4. Oath or Declaration [Total Pages 01] a. <input checked="" type="checkbox"/> Newly Executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).			
5. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ Prior application information: Examiner _____ Group / Art Unit: _____			

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		24309 (Insert Customer No. or Attach bar code label here)		or <input type="checkbox"/> Correspondence address below	
Name Attn: Kim Kanzaki					
Address					
City		State		Zip Code	
Country		Telephone 408-879-6149		Fax 408-377-6137	

Name (Print/Type)	Kim Kanzaki	Registration No. (Attorney/Agent)	37,652
Signature		Date	October 21, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, P.O. Box 1450, Alexandria, Virginia, 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop: Patent Application, P.O. Box 1450, Alexandria, Virginia, 22313-1450.

 10/21/03
 10/691146
 U.S. PTO

**FEE TRANSMITTAL
for FY 2003**

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) **1090.00****Complete if Known**

Application Number	Unknown
Filing Date	October 21, 2003
First Named Inventor	Austin H. Lesea
Examiner Name	Unknown
Art Unit	Unknown
Attorney Docket No.	X-1383 US

METHOD OF PAYMENT (check all that apply)1. ☒ Deposit Account:Deposit
Account
Number

24-0040

Deposit
Account
Name

XILINX, INC.

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity

Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	Utility filing fee	\$770
1002	320	Design filing fee	
1003	490	Plant filing fee	
1004	770	Reissue filing fee	
1005	160	Provisional filing fee	

SUBTOTAL (1) (\$) **770.00****2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
26	20** =	6	\$108
05	3** =	2	\$172
Multiple Dependent			

Large Entity

Fee Code	Fee (\$)	Fee Description
1202	18	Claims in excess of 20
1201	86	Independent claims in excess of 3
1203	290	Multiple dependent claim, if not paid
1204	86	**Reissue independent claims over original patent
1205	18	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) **280.00**

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity

Fee Fee

Code Code

(\$)

Fee Description

Fee Paid

1051 130

1052 50

147 2,520

1812 920*

1805 1,840*

1251 110

1252 420

1253 950

1254 1,480

1255 2,010

1401 330

1402 330

1403 290

1451 1,510

1452 110

1453 1,330

1501 1,240

1460 130

1807 50

1806 180

8021 40

1809 770

1810 770

1801 770

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) **40.00****SUBMITTED BY**Name (Print/Type) **Kim Kanzaki**Registration No.
(Attorney/Agent)

37,652

Complete (if applicable)

Telephone

408-879-6149

Signature

Date

10-21-2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.27 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia, 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia, 22313-1450.

**NONPUBLICATION REQUEST
UNDER
35 U.S.C. 122(b)(2)(B)(i)**

First Named Inventor

Austin H. Lesea

Title

Control of Simultaneous Switch Noise From Multiple Outputs

Atty Docket Number

X-1383 US

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.

October 21, 2003

Date


Signature

Kim Kanzaki Reg. No. 37,652

Typed or printed name

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**

Burden Hour Statement: This collection of information is required by 37 CFR 1.213(a). The information is used by the public to request that an application not be published under 35 U.S.C. 122(b) (and the PTO to process that request). Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 6 minutes to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, Virginia, 22313-1450. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia, 22313-1450.**